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CONFIRMATION NO. 3495

<b>SERIAL NUMBER</b> 10/776,457	<b>FILING OR 371(c) DATE</b> 02/10/2004 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3767	<b>ATTORNEY DOCKET NO.</b> 021770-000600US
<b>APPLICANTS</b> Eitan Konstantino, Orinda, CA; Tanhum Feld, Moshav, ISRAEL;				
<b>** CONTINUING DATA *****</b> <i>NA</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>PN</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 07/15/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i> Verified and <i>DA</i> Acknowledged <i>DA</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 73
				<b>INDEPENDENT CLAIMS</b> 7
<b>ADDRESS</b> 20350				
<b>TITLE</b> Balloon catheter with spiral folds				
<b>FILING FEE RECEIVED</b> 1352	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	